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PTO/SB/21 (08-00)

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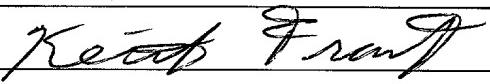
(to be used for all correspondence after initial filing)

		Application Number	09/838,043
		Filing Date	04/18/2001
		First Named Inventor	Mischo, Donald J.
		Group Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	1 + 11	Attorney Docket Number	MISCHO-2

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1 page)	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s) (8 sheets)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): copy of Notice to File Corrected Application Papers (part 2) (1 page)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Keith Frantz
Signature	
Date	09-13-01

### CERTIFICATE OF MAILING

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Typed or printed name	Keith Frantz
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Date	9-13-01

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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/838,043	04/18/2001	Donald J. Mischo	MISCHO-2

**CONFIRMATION NO. 2963**

20606  
KEITH FRANTZ  
401 WEST STATE STREET  
SUITE 200  
ROCKFORD, IL 61101

**FORMALITIES LETTER**



\*OC00000006178181\*

Date Mailed: 06/13/2001

**NOTICE TO FILE CORRECTED APPLICATION PAPERS**

***Filing Date Granted***

This application has been accorded an Application Number and Filing Date. The application, however, is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given **TWO MONTHS** from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a)

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
  - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

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*A copy of this notice **MUST** be returned with the reply.*

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